| ORDER FOR SUPPLIES OR SERVICES                                                                                                                                 |                                                                                                                                                                                                                                                                                                     |                    |                                                                                                                            |           |                           |                                                   |                                                                                       |                                     | PAGE 1 OF 4          |                    |                   |                              |  |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------|----------------------------------------------------------------------------------------------------------------------------|-----------|---------------------------|---------------------------------------------------|---------------------------------------------------------------------------------------|-------------------------------------|----------------------|--------------------|-------------------|------------------------------|--|
|                                                                                                                                                                |                                                                                                                                                                                                                                                                                                     |                    |                                                                                                                            |           |                           |                                                   |                                                                                       |                                     |                      |                    |                   |                              |  |
| 1. CONTRACT PURCH ORDER/AGREEMENT NO. 2. DELIVERY ORDER/ SP0750-02-D-9720 BRC3                                                                                 |                                                                                                                                                                                                                                                                                                     |                    |                                                                                                                            |           | /CALL NO.                 | 3. DATE OF ORDER/CALL<br>(YYYYMMMDD)<br>2004JAN06 |                                                                                       |                                     |                      | QUEST NO.          | 5. PRIORITY DOA4  |                              |  |
| 6. ISSUED BY CODE W56HZV                                                                                                                                       |                                                                                                                                                                                                                                                                                                     |                    |                                                                                                                            |           |                           | 7. ADMINIST                                       |                                                                                       |                                     |                      |                    | 1403A             | 8. DELIVERY FOB              |  |
| TACOM WARREN BLDG 231 AMSTA-AQ-ATAD ARLENE CHLOPICK (586)574-7624 WARREN, MICHIGAN 48397-5000 EMAIL: CHLOPICA@TACOM.ARMY.MIL HTTP://CONTRACTING.TACOM.ARMY.MIL |                                                                                                                                                                                                                                                                                                     |                    |                                                                                                                            |           |                           |                                                   | DCMA CHICAGO<br>1523 WEST CENTRAL ROAD<br>BLDG 203<br>ARLINGTON HEIGHTS IL 60004-2451 |                                     |                      |                    |                   | X DESTINATION OTHER          |  |
| H.I.I.                                                                                                                                                         | P://CONTR                                                                                                                                                                                                                                                                                           | AC.I.1             | .NG.TACOM.ARMY.M                                                                                                           | 111       |                           | SCD: C                                            | PAS: N                                                                                | IONE                                |                      | ADP PT: HQ033      | 39                | (See Schedule if other)      |  |
| 9. CONTR                                                                                                                                                       | ACTOR                                                                                                                                                                                                                                                                                               |                    |                                                                                                                            | CODE      | 45152                     | FACIL                                             | ITY                                                                                   |                                     | ELIVER TO F          | OB POINT BY (Date) |                   | 11. X IF BUSINESS IS         |  |
|                                                                                                                                                                | OSHKO                                                                                                                                                                                                                                                                                               | SH T               | TRUCK CORP.                                                                                                                |           |                           |                                                   | •                                                                                     | (1                                  | TTTMMMD              |                    | SMALL             |                              |  |
| NAME                                                                                                                                                           | OSHKO                                                                                                                                                                                                                                                                                               | SH T               | TRUCK CORPORATION                                                                                                          | ON        |                           |                                                   | SEE SCHEDULE  12. DISCOUNT TERMS  Net 30 Days                                         |                                     |                      |                    |                   | SMALL DISADVANTAGED          |  |
| AND<br>ADDRESS                                                                                                                                                 | P.O.                                                                                                                                                                                                                                                                                                | зох                |                                                                                                                            |           |                           |                                                   |                                                                                       |                                     |                      |                    |                   | WOMAN-OWNED                  |  |
|                                                                                                                                                                | •                                                                                                                                                                                                                                                                                                   |                    |                                                                                                                            |           |                           |                                                   | •                                                                                     | 13. M                               | AIL INVOICE          | S TO THE ADDRESS   | IN BLOCK          |                              |  |
| 14. SHIP T                                                                                                                                                     |                                                                                                                                                                                                                                                                                                     | BUS]               | INESS: Large Bus                                                                                                           | cope      | Performing                | 1                                                 | T WILL BE MADE I                                                                      |                                     | Block 15             | COD                | <b>р</b> Е НQ0339 | MARK ALL                     |  |
|                                                                                                                                                                | SCHEDULE                                                                                                                                                                                                                                                                                            |                    |                                                                                                                            | CODE      |                           | 1                                                 | S - COLUMBUS                                                                          |                                     | ER                   | COL                | E HQU339          | PACKAGES AND                 |  |
|                                                                                                                                                                |                                                                                                                                                                                                                                                                                                     |                    |                                                                                                                            |           |                           |                                                   | S-CO/WEST ENT<br>BOX 182381                                                           | TTLEM                               | MENT OPERA           | ATIONS             |                   | PAPERS WITH IDENTIFICATION   |  |
|                                                                                                                                                                |                                                                                                                                                                                                                                                                                                     |                    |                                                                                                                            |           |                           | COLU                                              | JMBUS, OH 432                                                                         | 18-23                               | 381                  |                    |                   | NUMBERS IN<br>BLOCKS 1 AND 2 |  |
| 16.<br>TYPE                                                                                                                                                    | DELIVERY/<br>CALL                                                                                                                                                                                                                                                                                   | х                  | THIS DELIVERY ORDER IS ISSUED ON ANOTHER GOVERNMENT AGENCY OR IN ACCORDANCE WITH AND SUBJECT TO TERMS AND CONDITIONS OF AF |           |                           |                                                   |                                                                                       |                                     |                      |                    |                   | E NUMBERED CONTRACT.         |  |
| OF<br>ORDER                                                                                                                                                    | PURCHASE                                                                                                                                                                                                                                                                                            |                    | Reference your                                                                                                             | Oral      |                           | -                                                 | specified herein.                                                                     | , D                                 | ated                 |                    |                   |                              |  |
|                                                                                                                                                                | PURCHASE  furnish the following on terms specified herein.  ACCEPTANCE. THE CONTRACTOR HEREBY ACCEPTS THE OFFER REPRESENTED BY THE NUMBERED PURCHASE ORDER AS IT MAY PREVIOUSLY HAVE BEEN OR IS NOW MODIFIED, SUBJECT TO ALL OF THE TERMS AND CONDITIONS SET FORTH, AND AGREES TO PERFORM THE SAME. |                    |                                                                                                                            |           |                           |                                                   |                                                                                       |                                     |                      |                    |                   |                              |  |
|                                                                                                                                                                |                                                                                                                                                                                                                                                                                                     |                    |                                                                                                                            |           |                           |                                                   |                                                                                       |                                     | SIGNED<br>MMMDD)     |                    |                   |                              |  |
| 17. ACCOUNTING AND APPROPRIATION DATA/LOCAL USE                                                                                                                |                                                                                                                                                                                                                                                                                                     |                    |                                                                                                                            |           |                           |                                                   |                                                                                       |                                     |                      |                    |                   |                              |  |
|                                                                                                                                                                | SCHEDULE                                                                                                                                                                                                                                                                                            |                    |                                                                                                                            |           |                           |                                                   | T                                                                                     |                                     | r                    | T                  | T                 |                              |  |
| 18. ITEM                                                                                                                                                       | NO. 19. S                                                                                                                                                                                                                                                                                           | СНЕ                | DULE OF SUPPLIES/SI                                                                                                        | ERVICE    |                           |                                                   | 20. QUANTITY<br>ORDERED/<br>ACCEPTED*                                                 | ?                                   | 21.<br>UNIT          | 22. UNIT PRICE     | 23. AMOUNT        |                              |  |
| SEE SCHEDULE<br>CONTRACT TYPE:                                                                                                                                 |                                                                                                                                                                                                                                                                                                     |                    |                                                                                                                            |           |                           |                                                   |                                                                                       |                                     |                      |                    |                   |                              |  |
| Firm-Fixed-Price                                                                                                                                               |                                                                                                                                                                                                                                                                                                     |                    |                                                                                                                            |           |                           |                                                   |                                                                                       |                                     |                      |                    |                   |                              |  |
|                                                                                                                                                                |                                                                                                                                                                                                                                                                                                     |                    | F CONTRACT:<br>ly Contracts and                                                                                            | d Price   | d Orders                  |                                                   |                                                                                       |                                     |                      |                    |                   |                              |  |
|                                                                                                                                                                | accepted by th                                                                                                                                                                                                                                                                                      |                    |                                                                                                                            | 4. UNITED | STATES OF A               |                                                   | / 0 = 0 = = - /                                                                       |                                     |                      |                    | 25. TOTAL         | \$4,775,000.00               |  |
| If differen                                                                                                                                                    |                                                                                                                                                                                                                                                                                                     | ity accepted below |                                                                                                                            | GROZDONP  | . GROZDON /<br>@TACOM.ARM | /SIGNED/<br>Y.MIL (586)57                         |                                                                                       |                                     |                      | 26.<br>DIFFERENCES | ;                 |                              |  |
|                                                                                                                                                                | rdered and enc                                                                                                                                                                                                                                                                                      |                    | N 20 HAS BEEN                                                                                                              | SY:       |                           |                                                   |                                                                                       | CON                                 | TRACTING/C           | ORDERING OFFICER   |                   |                              |  |
|                                                                                                                                                                | PECTED                                                                                                                                                                                                                                                                                              |                    |                                                                                                                            |           |                           | ORMS TO CONT                                      | RACT EXCEPT AS                                                                        | NOTE                                |                      |                    |                   |                              |  |
| b. SIGNATURE OF AUTHORIZED GOVERNMENT REPRESENTATIVE  c. DATE (YYYYMMMDD)  d. PRINTED NAME AND TITLE OF AUTHORIZE REPRESENTATIVE                               |                                                                                                                                                                                                                                                                                                     |                    |                                                                                                                            |           |                           |                                                   |                                                                                       |                                     |                      | D GOVERNMENT       |                   |                              |  |
| e. MAILING ADDRESS OF AUTHORIZED GOVERNMENT REPRESENTATIVE                                                                                                     |                                                                                                                                                                                                                                                                                                     |                    |                                                                                                                            |           |                           | VE                                                | 28. SHIP. NO.                                                                         |                                     | 29. D.O. VOUCHER NO. |                    | 30. INITIALS      |                              |  |
|                                                                                                                                                                |                                                                                                                                                                                                                                                                                                     |                    |                                                                                                                            |           |                           |                                                   | PARTIA                                                                                | ,                                   | 32. PAID BY          |                    | 33. AMOUNT V      | ERIFIED CORRECT FOR          |  |
| f. TELEPHONE NUMBER g. E-MAIL ADDRESS                                                                                                                          |                                                                                                                                                                                                                                                                                                     |                    |                                                                                                                            |           |                           |                                                   | FINAL                                                                                 | L                                   |                      |                    |                   |                              |  |
| 36. I CERTIFY THIS ACCOUNT IS CORRECT AND PROPER FOR PAYMENT.                                                                                                  |                                                                                                                                                                                                                                                                                                     |                    |                                                                                                                            |           |                           |                                                   | 31. PAYMENT                                                                           | 31. PAYMENT 34. CHI                 |                      |                    |                   | CHECK NUMBER                 |  |
| a. DATE b. SIGNATURE AND TITLE OF CERTIFYING OFFICER                                                                                                           |                                                                                                                                                                                                                                                                                                     |                    |                                                                                                                            |           |                           |                                                   | COMPL                                                                                 | COMPLETE 35, BILL OF LAD            |                      |                    | ADING NO.         |                              |  |
| (YYYYMMMDD)                                                                                                                                                    |                                                                                                                                                                                                                                                                                                     |                    |                                                                                                                            |           |                           | - III                                             | PARTIA FINAL                                                                          | PARTIAL                             |                      |                    |                   |                              |  |
| 37. RECEIVED AT  38. RECEIVED BY (Print)  39. DATE RECEIV (YYYYMMMDD)                                                                                          |                                                                                                                                                                                                                                                                                                     |                    |                                                                                                                            |           |                           | 40. TOTAL CO<br>TAINERS                           | N-                                                                                    | 41. S/R ACCOUNT NUMBER 42. S/R VOUC |                      |                    | ER NO.            |                              |  |

**CONTINUATION SHEET** 

## Reference No. of Document Being Continued PIIN/SIIN SP0750-02-D-9720/BRC3 MOD/AMD

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Name of Offeror or Contractor: OSHKOSH TRUCK CORP.

| ITEM NO | SUPPLIES/SERVICES                                                                                                                                                                                                                                                                            | QUANTITY | UNIT | UNIT PRICE      | AMOUNT          |
|---------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|------|-----------------|-----------------|
|         | SUPPLIES OR SERVICES AND PRICES/COSTS                                                                                                                                                                                                                                                        |          |      |                 |                 |
| 0001    | NSN: 2520-01-366-3317<br>FSCM: 45152<br>PART NR: 1837430U<br>SECURITY CLASS: Unclassified                                                                                                                                                                                                    |          |      |                 |                 |
| 0001AA  | THRID OPITON YEAR                                                                                                                                                                                                                                                                            | 250      | EA   | \$ 19,100.00000 | \$ 4,775,000.00 |
|         | NOUN: AXLE ASSEMBLY, AUTOM PRON: EH3A4434EH PRON AMD: 02 ACRN: AA AMS CD: 060011                                                                                                                                                                                                             |          |      |                 |                 |
|         | Packaging and Marking PACKAGING/PACKING/SPECIFICATIONS: MIL STD 2073-1C UNIT PACK: 001 LEVEL PRESERVATION: Commercial LEVEL PACKING: Commercial                                                                                                                                              |          |      |                 |                 |
|         | Inspection and Acceptance INSPECTION: Origin ACCEPTANCE: Origin                                                                                                                                                                                                                              |          |      |                 |                 |
|         | Deliveries or Performance  DOC SUPPL  REL CD MILSTRIP ADDR SIG CD MARK FOR TP CD  001 W56HZV3265T966 W25G1U J 2  DEL REL CD QUANTITY DAYS AFTER AWARD  001 125 0330                                                                                                                          |          |      |                 |                 |
|         | FOB POINT: Destination                                                                                                                                                                                                                                                                       |          |      |                 |                 |
|         | SHIP TO: FREIGHT ADDRESS  (W25G1U) XU TRANSPORTATION OFFICER  DDSP NEW CUMBERLAND FACILITY  BUILDING MISSION DOOR 113 134  NEW CUMBERLAND PA 17070-5001                                                                                                                                      |          |      |                 |                 |
|         | CONTRACT/DELIVERY ORDER NUMBER SP0750-02-D-9720/BRC3                                                                                                                                                                                                                                         |          |      |                 |                 |
|         | DOC         SUPPL           REL CD         MILSTRIP         ADDR         SIG CD         MARK FOR         TP CD           002         W56HZV3265T967         W62G2T         J         2           DEL REL CD         QUANTITY         DAYS AFTER AWARD           001         125         0330 |          |      |                 |                 |
|         | FOB POINT: Destination                                                                                                                                                                                                                                                                       |          |      |                 |                 |
|         | SHIP TO: <u>FREIGHT ADDRESS</u> (W62G2T) XU DEF DIST DEPOT SAN JOAQUIN  25600 S CHRISMAN ROAD                                                                                                                                                                                                |          |      |                 |                 |

CONTINUATION SHEET

## Reference No. of Document Being Continued PIIN/SIIN SP0750-02-D-9720/BRC3 MOD/AMD

Page 3 of 4

| Name of Offeror or Contractor: OSHKOSH TRUCK CORP. |                                |          |      |            |        |  |  |  |  |  |
|----------------------------------------------------|--------------------------------|----------|------|------------|--------|--|--|--|--|--|
| ITEM NO                                            | SUPPLIES/SERVICES              | QUANTITY | UNIT | UNIT PRICE | AMOUNT |  |  |  |  |  |
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|                                                    | TRACY CA 95376-5000            |          |      |            |        |  |  |  |  |  |
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|                                                    | CONTRACT/DELIVERY ORDER NUMBER |          |      |            |        |  |  |  |  |  |
|                                                    | SP0750-02-D-9720/BRC3          |          |      |            |        |  |  |  |  |  |
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| CONTINUATION SHEET      |                                                    |         |       |            | Ref                          | Reference No. of Document Being Continued |        |                               |          |     |                                      |  |
|-------------------------|----------------------------------------------------|---------|-------|------------|------------------------------|-------------------------------------------|--------|-------------------------------|----------|-----|--------------------------------------|--|
|                         | CONTIN                                             | UAII    | ON S. | HEE I      | PIIN/SI                      | PIIN/SIIN SP0750-02-D-9720/BRC3           |        |                               | AMD      |     |                                      |  |
| Name                    | Name of Offeror or Contractor: OSHKOSH TRUCK CORP. |         |       |            |                              |                                           |        |                               |          |     |                                      |  |
| CONTRAC                 | T ADMINISTRA                                       | TION DA | ATA   |            |                              |                                           |        |                               |          |     |                                      |  |
| LINE<br><u>ITEM</u>     | PRON/<br>AMS CD/<br>MIPR                           | -       | BLG   | ACCOUNTING | G CLASSIFICATION             | Ī                                         |        | JOB<br>ORDER<br><u>NUMBER</u> | ACCOUNT: | ING | OBLIGATED<br><u>AMOUNT</u>           |  |
| 0001AA                  | EH3A4434EH<br>060011                               | AA      | 2 9   | 97 X4930   | DAC9D 6D                     | 26FB                                      | S20113 |                               | W56HZV   | \$  | 4,775,000.00                         |  |
|                         |                                                    |         |       |            |                              |                                           |        |                               | TOTAL    | \$  | 4,775,000.00                         |  |
| SERVICE<br>NAME<br>Army |                                                    | L BY AC |       |            | G CLASSIFICATION<br>DAC9D 6D | <u>I</u><br>26FB                          | S20113 | ACCOUI<br>STATIO<br>W56HZ     | ON       | \$_ | OBLIGATED <u>AMOUNT</u> 4,775,000.00 |  |

TOTAL \$ 4,775,000.00